## **CERTIFICATE OF MAILING**

I hereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

on  $\frac{12(23)}{2}$ 

Jeffrey R. Kuester

RECEIVED

JAN 0 2 2004

**Technology Center 2600** 

In Re Application of:

Confirmation No.: 8546

Rodriguez et al.

Group Art Unit: 2614

Serial No.: 09/693,784

Examiner: Beliveau, Scott E.

Filed: 10-20-00

Docket No.: A-6690 (191910-1600)

For: Media-On-Demand Filing and Reminder System

The following is a list of documents enclosed:

Return Postcard Amendment Transmittal Amendment

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

## Docket No. AMENDMENT TRANSMITTAL LETTER (LARGE) A-6690 (191910-1600) Applicant(s): Rodriguez Confirmation No. Group Art Unit Filing Date Examiner Serial No. 10/20/00 Beliveau, Scott E. 8546 2614 09/693.784 Invention: Media-On-Demand Filing and Reminder System RECEIVED **Commissioner for Patents** JAN 0 2 2004 Mail Stop Non-Fee Amendment P.O. Box 1450 Alexandria VA 22313-1450 **Technology Center 2600** Transmitted herewith is Response to Non-Final Office Action in the above-identified application. The fee has been calculated and is transmitted as shown below CLAIMS AS AMENDED NUMBER EXTRA ADDITIONAL HIGHEST # **CLAIMS REMAINING CLAIMS PRESENT** RATE FEE PREV. PAID FOR AFTER AMENDMENT \$0.00 TOTAL CLAIMS 82 -82 = 0 Х \$18.00 \$86.00 \$0.00 7 = 0 INDEP. CLAIMS 7 -\$290.00 \$ Multiple Dependent Claims (check if applicable) 2<sup>ND</sup> MONTH 3<sup>RD</sup> MONTH 4<sup>TH</sup> MONTH **EXTENSION FEE** 1<sup>ST</sup> MONTH 1,480.00 420.00 950.00 110.00 \$ Other Fees: \$0.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT No additional fee is required for the Response to Non-Final Office Action. Please charge Deposit Account No. in the amount of to cover the filing fee is enclosed. A duplicate copy of this page is enclosed. A check in the amount of A Credit Card Payment Form PTO-2038 is attached in the amount of \$ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778. A duplicate copy of this page is enclosed.